

February 7, 2001

VETERANS HEALTH CARE SERVICE STANDARDS

1. PURPOSE: This Veterans Health Administration (VHA) Directive states the expectations and rationale for promoting and supporting a unified and comprehensive set of Veterans Health Care Service Standards, complying with the requirements of Executive Order 12862, entitled "Setting Customer Service Standards," which calls for agencies to post customer service standards and measure the results against those standards.

2. BACKGROUND: VHA's mission is to provide patient-centered health care that is comparable with or better than care available in the non-Department of Veterans Affairs (VA) sector. It is essential that veteran patients view VA as the best place to receive their health care and that VHA becomes their provider of choice.

a. Executive Order Number 12862, Setting Customer Service Standards, dated September 11, 1993, called for Federal agencies to change how they do business to focus on customer (Veterans Health Care) service. As part of the second phase of reinventing government, a Presidential Memorandum for Heads of Executive Departments and Agencies memorandum was issued on March 22, 1995, which emphasizes the continuation of Government-wide efforts to integrate and restructure our activities in order to improve customer service. The memorandum further directs that achieved results should be reported to the Agency's customers.

b. In order to accomplish this objective, VHA created ten detailed Veterans Health Care Service Standards derived from veteran-reported priorities for service. These standards are intended to provide direction to all VHA Networks and facilities to ensure that the highest quality care and services are made available to our veterans, and, by extension, their families and/or significant others.

c. The specific goal that applies to this directive within VHA's 6 for 2006 Strategic Mission and Vision is: "To Exceed Patients' and Employees' Expectations." Within this goal, the Veterans Health Care Service Standards are:

(1) **Staff Courtesy.** VHA will design and maintain a health care environment where all veterans, their families, and significant others are treated with courtesy and dignity throughout every aspect of their treatment.

(2) **Timeliness.** VHA will provide veterans with timely and convenient access to health care.

(3) **One Provider.** One health care team will be in charge of each patient's care.

(4) **Decisions.** VHA will involve patients, their families, and significant others in decisions about their health care.

(5) **Physical Comfort.** VHA will strive to meet its patients' pain management and physical comfort needs.

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- (6) **Emotional Needs.** VHA will provide support to meet its patients' emotional needs.
- (7) **Coordination of Care.** VHA will take responsibility for providing seamless coordination of its patients' care within other VA offices, as well as in non-VA facilities and organizations.
- (8) **Patient Education.** VHA will provide written and oral information and education about veterans' health care that all veterans, their families and significant others will understand.
- (9) **Family Involvement.** VHA will provide the opportunity to involve veterans' families and significant others in their care when appropriate.
- (10) **Transition.** VHA will provide a smooth transition between veterans' inpatient and outpatient care.

d. The following National Timeliness Goals will be accomplished by Fiscal Year (FY) 2006 consistent with VHA's 6 for 2006 Strategic Mission and Vision:

- (1) Patients will have access to telephone care 7 days per week, 24 hours a day.
- (2) New patients desiring routine care, will be scheduled as soon as possible, and within 30 days.
- (3) Patients will be seen by a provider within 20 minutes of their scheduled appointment.
- (4) Patients will be able to schedule a follow-up appointment with their primary care provider within 30 days.
- (5) Patients will have an appointment with a specialist within 30 days of referral.

***NOTE:** The preceding standards and goals are to be used by each Network in developing a Network-level plan and should be the basis for which periodic assessments are made regarding the accomplishment and achievement of local veterans' health care service initiatives.*

3. POLICY: It is VHA policy to comply with Executive Order 12862 and the Presidential Memorandum for Heads of Executive Departments and Agencies memorandum dated March 22, 1995.

4. ACTION

a. **Establish Standards and Timeliness Goals.** Each Network must integrate VHA's Veterans Health Care Service Standards and meet the Timeliness Goals contained therein by FY 2006, as indicated in this directive. ***NOTE:** Each Network needs to communicate to veterans, in language they can easily understand, each facility's current level of compliance with each of*

the ten Veterans Health Care Service Standards. These national Veterans Health Care Service Standards and local timeliness goals should be incorporated into the Network Strategic Plan. It is very important that each Network and the facilities tailor the national timeliness goals to their unique setting (e.g., long-term care facility versus a tertiary referral hospital; rural versus urban considerations; or other mission-specific standards, needs or local customs). VHA's timeliness goals should be consistent with Joint Commission on Accreditation of Healthcare Organizations (JCAHO) requirements as they relate to patient rights and patient responsibilities.

b. Reporting and Posting of Results

(1) **National Reporting.** VHA's National Office of Quality and Performance is to publish the results of inpatient (annually) and outpatient (biannually) veteran feedback surveys and will provide VHA-wide, Network- and facility-level reports. **NOTE:** *To assist Networks in communicating results to veterans, the Office of Quality and Performance Web page at <http://vaww.npdfc.med.va.gov> can be used to create customer-friendly reports suitable for posting on bulletin boards or other publications designed for veterans and their families. Local survey instruments may also be used in conjunction with the national survey to further assist Network and facility customer service initiatives. Networks are encouraged to use the most appropriate and effective means possible to ensure that their patients understand and are aware of their facilities progress in meeting and exceeding VHA's Veterans Health Care Service Standards. Use of all resources within VHA, including those available from the Quality Scholars program, Office of Quality and Performance, Employee Education Service, and others, are encouraged.*

(2) **Local Reporting.** Once the Network and facilities have reviewed their performance on the National Veterans Health Care Services Standards, results will be reported to patients and posted at least annually beginning no later than April 1, 2001. Reports must be in a language readily understood by patients and their families. **NOTE:** *Results should delineate the facility's achievements and areas for improvement, as well as action plans to improve patient services. Posting of results can be in the form of storyboards, newsletters to patients, and other appropriate means. VHA's Report Card initiative, expected to undergo pilot testing in FY 2001, will provide a more comprehensive framework for Veterans Health Care Services reporting. Local success stories can also be reported and may come from complimentary letters, actual clinicians' day-to-day accomplishments, results of Process Action Teams, focus groups, and other significant events such as the Salute to Hospitalized Veterans, National Veterans Wheelchair Games, National Veterans Winter Sports Clinic, and Women Veterans Recognition Week.*

5. REFERENCE: Presidential Memorandum for Heads of Executive Departments and Agencies, dated March 22, 1995.

6. FOLLOW-UP RESPONSIBILITY: The Office of Quality and Performance (10Q) is responsible for the contents of this Directive.

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7. RESCISSION: VHA Directive 10-95-080 is rescinded. This VHA Directive expires February 28, 2006.

S/ Frances Murphy, M.D. for
Thomas L. Garthwaite, M.D.
Under Secretary for Health

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